

**2000 UNIFORM BUSINESS REPORT (UBR)**

557

**FILED**  
**Aug 17, 2000 8:00 am**  
**Secretary of State**

05-26-2000 90115 040 \*\*\*550.00

**DOCUMENT # F99000003895**

1. Entity Name

COL-INS-CO., INC.

*[Handwritten signature]*

Principal Place of Business: 12150 EAST BRIARWOOD AVENUE, SUITE 140, ENGLEWOOD CO 80112-6701  
 Mailing Address: 12150 EAST BRIARWOOD AVENUE, SUITE 140, ENGLEWOOD CO 80112-6755

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

59-0860990-391-1508-1112

4. FEI Number

APPLIED FOR

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C.T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: PD  
 NAME: WHITT, MICHAEL D  
 STREET ADDRESS: 12140 EAST BRIARWOOD AVENUE, SUITE 140  
 CITY-ST-ZIP: ENGLEWOOD CO 80112-6701  Delete

TITLE:  Change  Addition  
 NAME:  Change  Addition  
 STREET ADDRESS:  Change  Addition  
 CITY-ST-ZIP:  Change  Addition

TITLE: S  
 NAME: PANASCI, ERNEST J  
 STREET ADDRESS: 12140 EAST BRIARWOOD AVENUE, SUITE 140  
 CITY-ST-ZIP: ENGLEWOOD CO 80112-6701  Delete

TITLE:  Change  Addition  
 NAME:  Change  Addition  
 STREET ADDRESS:  Change  Addition  
 CITY-ST-ZIP:  Change  Addition

TITLE: T  
 NAME: PERRY, VICTORIA  
 STREET ADDRESS: 12140 EAST BRIARWOOD AVENUE, SUITE 140  
 CITY-ST-ZIP: ENGLEWOOD CO 80112-6701  Delete

TITLE:  Change  Addition  
 NAME:  Change  Addition  
 STREET ADDRESS:  Change  Addition  
 CITY-ST-ZIP:  Change  Addition

TITLE:  Delete

TITLE:  Change  Addition

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TITLE:  Delete

TITLE:  Change  Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate, and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other info empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*[Handwritten signature: Victoria Perry]* 12/19/00 *[Handwritten name: Treasurer]*

Date

Daytime Phone #

(303) 792-9330  
 X-311

DEK-00000

C: